	1.7
	œ
	-
==	12
	LU
===	~
===	-
==	Ø
	٠
===	
==	Д
	Н
	Ć.
	J

PTO/SB/05 (03-01)

Please type a plus sign (+) inside this box

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Foundary the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION **TRANSMITTAL**

15-NM-5906 Attorney Docket No. Bo Pettersson First Inventor SYSTEM FOR CORRELATION OF MR IMAGES WITH PHYSIOLOGICAL DATA

Express Mail Label No. ET374214899US (Only for new nonprovisional applications under 37 CFR 1.53(b))

ASSISTANCE COMMISSIONER FOR PATENTS Assistant Commissioner for Patents					
APPLICATION ELEMENTS			ADDRESS TO: Box Patent Application		
	cerning utility patent application conte			hington, DC 20	
	orm (e.g., PTO/SB/17) duplicate for fee processing)	7.	CD-ROM or CD-R in Computer Program ()		e table or
Applicant claims s	mall entity status.	8. Nu	electide and/or Amino Ac		ubmission
2. See 37 CFR 1.27.	171		applicable, all necessary		
3. Specification (preferred arrangement		a. (Computer Readable	` '	
- Descriptive title	of the invention e to Related Applications	b.	Specification Sequence L	_isting on:	
	arding Fed sponsored R & D		i. 🔲 CD-ROM or	CD-R (2 copie	s); or
	quence listing, a table,		i i. 🔲 paper		
or a computer p - Background of	rogram listing appendix	с.	Statements verifyin	a identity of ab	ove copies
- Brief Summary	of the Invention				<u>·</u>
	n of the Drawings (if filed)		CCOMPANYING A		
 Detailed Description Claim(s) 	puon	9. [Assignment Papers	•	` ''
- Abstract of the	Disclosure	10.	37 CFR 3.73(b) State (when there is an as		Power of Attorney
4. X Drawing(s) (35 U	.S.C. 113) [Total Sheets 4]	English Translation	Document (if a	
5. Oath or Declaration	[Total Pages 2]] 12.[Information Disclose Statement (IDS)/PT		Copies of IDS Citations
a. X Newly execu	uted (original or copy)	13.	Preliminary Amenda		
Copy from a	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed) 14.	Return Receipt Pos (Should be specification		03)
	ION OF INVENTOR(S) tement attached deleting inventor(s)	15.	Certified Copy of Professional Control Copy of Profession Profession Profession Copy of C		nt(s)
named in t	he prior application, see 37 CFR	16.	Nonpublication Rec		
1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35				form PTO/SB/35	
6. Application Data Sheet. See 37 CFR 1.76 or its equivalent.					
o Application bata	Sheet. Gee 37 CFR 1.70		Other:		
	CATION, check appropriate box, and	supply the requ	isite information below a	nd in a prelimir	nary amendment,
or in an Application Data She	-				
Continuation	Divisional Continuation-in-part (CIP)	of prior application No.:	_/	
Prior application information:	Examiner		Group Art Unit:		
	ONAL APPS only: The entire disclosure the disclosure of the accompanying co				
	relied upon when a portion has been in				
	19. CORRESPO	ONDENCE ADD	RESS		
X Customer Number or Bar Co	rde Label	79.10	or 🔲	Correspondence ad	idress below
Name					
Address	2694	5			
City	PATENT TRADEMARK	OFFICEState		Zip Code	
Country		Telephone		Fax	
Name (PrintlType)	Joseph S. Heino, Esq.	Rea	stration No. (Attorney)	Agent) 31	,524
		 	$\overrightarrow{}$		
Signature	is actingted at take 0.2 hours to complete	ime will yary d	enending upon the needs of	Date [04/2	23/2001

Burden Hour Statement: This form is estimated at take 0.2 hours to complete. Ame will vary depending upon the needs of the individual case. Any comments on the amount of time you are equired to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

In talk the first state from the first first first

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	7	1	(

Complete if Known		
Application Number		
Filing Date	4/23/2001	
First Named Inventor	Bo Pettersson	
Examiner Name		
Group Art Unit		
Attorney Docket No.	15_NM_5006	

METHOD OF PAYMENT	FEE CALCULATION (continued)		
The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to	3. ADDITIONAL FEES		
indicated fees and credit any overpayments to Deposit	Large Small Entity Entity		
Account Number 070845	•	Fee Paid	
Deposit Account General Electric Medical	105 130 205 65 Surcharge - late filing fee or oath		
Charge Any Additional Fee Required Systems	127 50 227 25 Surcharge - late provisional filing fee or cover sheet		
Under 37 CFR 1.16 and 1.17 Applicant claims small entity status	139 130 139 130 Non-English specification		
See 37 CFR 1 27	147 2,520 147 2,520 For filing a request for ex parte reexamination		
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action		
Check Credit card Order Other	113 1,840° 113 1,840° Requesting publication of SIR after Examiner action		
	115 110 215 55 Extension for reply within first month		
1. BASIC FILING FEE Large Entity Small Entity	116 390 216 195 Extension for reply within second month		
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month		
Code (4) Code (4)	118 1,390 218 695 Extension for reply within fourth month		
101 710 201 355 Utility filing fee 710	128 1,890 228 945 Extension for reply within lifth month		
106 320 206 160 Design filing fee	119 310 219 155 Notice of Appeal		
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal		
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing		
·	138 1,510 138 1,510 Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 710	140 110 240 55 Petition to revive - unavoidable		
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional		
Fee from Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)		
Total Claims20*** = X =	143 440 243 220 Design issue fee		
Independent - 3** = X = =	144 600 244 300 Plant issue fee		
Multiple Dependent	122 130 122 130 Petitions to the Commissioner		
	123 130 123 130 Petitions related to provisional applications		
Large Entity Small Entity Fee Fee Fee Fee Pescription	126 180 126 180 Submission of Information Disclosure Stmt		
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)		
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection (37 CFR § 1 129(a))		
104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))		
over original patent	179 710 279 355 Request for Continued Examination (RCE)		
110 18 210 9 *** Ressue claims in excess of 20 and over original patent	169 900 169 900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$)	Other fee (specify)		
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3)			
or many programmy programmy and a second prog			

SUBMITTED BY			Complete (if applicable)
Name (Pnnt/Type)	Joseph S. Heino	Registration No. (Attorney/Agent) 31,524	Telephone 262.785.9000
Signature	Joseph S. S.		Dale

WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS 10 THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

In re Application of:

Bo Pettersson/Robert H. Haworth

For: SYSTEM FOR CORRELATION OF MR IMAGES WITH PHYSIOLOGICAL DATA

EXPRESS MAIL CERTIFICATE

"Express Mail" label number: ET374214899US

Date of Deposit: April 23, 2001

I hereby certify that the attached Utility Patent Application Transmittal (1 page), Fee Transmittal Form (1 page), Application for United States Patent (17 pages), drawings (4 pages), and Combined Declaration and Power of Attorney (2 pages), is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Box PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231-0001.

Darbara M. Majershi Barbara M. Majewski